



General Assembly

January Session, 2011

**Governor's Bill No. 6392**

LCO No. 3446

\*03446\_\_\_\_\_\*

Referred to Committee on Public Health

Introduced by:

REP. DONOVAN, 84<sup>th</sup> Dist.

REP. SHARKEY, 88<sup>th</sup> Dist.

SEN. WILLIAMS, 29<sup>th</sup> Dist.

SEN. LOONEY, 11<sup>th</sup> Dist.

***AN ACT CONCERNING BIRTH-TO-THREE SERVICES AND  
REHABILITATION SERVICES FOR CHRONIC GAMBLERS.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 38a-490a of the general statutes is repealed and  
2 the following is substituted in lieu thereof (*Effective July 1, 2011*):

3 Each individual health insurance policy providing coverage of the  
4 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-  
5 469 delivered, issued for delivery or renewed in this state on or after  
6 July 1, 1996, shall provide coverage for medically necessary early  
7 intervention services provided as part of an individualized family  
8 service plan pursuant to section 17a-248e. Such policy shall provide  
9 [(1)] coverage for such services provided by qualified personnel, as  
10 defined in section 17a-248, for a child from birth until the child's third  
11 birthday. [, and (2)] No such policy shall impose a coinsurance,  
12 copayment, deductible or other out-of-pocket expense for such services

13 that are more restrictive than that imposed on substantially all other  
14 benefits provided under such policy, except that a high deductible  
15 plan, as that term is used in subsection (f) of section 38a-493, shall not  
16 be subject to the deductible limits set forth in this section. Such policy  
17 shall provide a maximum benefit of six thousand four hundred dollars  
18 per child per year and an aggregate benefit of nineteen thousand two  
19 hundred dollars per child over the total three-year period, except that  
20 for a child with autism spectrum disorders, as defined in section 38a-  
21 514b, as amended by this act, the maximum benefit shall be fifty  
22 thousand dollars per child per year and an aggregate benefit of one  
23 hundred fifty thousand dollars per child over the total three-year  
24 period. No payment made under this section shall be applied by the  
25 insurer, health care center or plan administrator against any maximum  
26 lifetime or annual limits specified in the policy or health benefits plan.

27 Sec. 2. Section 38a-516a of the general statutes is repealed and the  
28 following is substituted in lieu thereof (*Effective July 1, 2011*):

29 Each group health insurance policy providing coverage of the type  
30 specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469  
31 delivered, issued for delivery or renewed in this state on or after July 1,  
32 1996, shall provide coverage for medically necessary early intervention  
33 services provided as part of an individualized family service plan  
34 pursuant to section 17a-248e. Such policy shall provide [(1)] coverage  
35 for such services provided by qualified personnel, as defined in section  
36 17a-248, for a child from birth until the child's third birthday. [, and  
37 (2)] No such policy shall impose a coinsurance, copayment, deductible  
38 or other out-of-pocket expense for such services that are more  
39 restrictive than that imposed on substantially all other benefits  
40 provided under such policy, except that a high deductible plan, as that  
41 term is used in subsection (f) of section 38a-493, shall not be subject to  
42 the deductible limits set forth in this section. Such policy shall provide  
43 a maximum benefit of six thousand four hundred dollars per child per  
44 year and an aggregate benefit of nineteen thousand two hundred  
45 dollars per child over the total three-year period, except that for a child

46 with autism spectrum disorders, as defined in section 38a-514b, as  
47 amended by this act, the maximum benefit shall be fifty thousand  
48 dollars per child per year and an aggregate benefit of one hundred  
49 fifty thousand dollars per child over the total three-year period. No  
50 payment made under this section shall be applied by the insurer,  
51 health care center or plan administrator against any maximum lifetime  
52 or annual limits specified in the policy or health benefits plan.

53 Sec. 3. Section 12-818 of the general statutes is repealed and the  
54 following is substituted in lieu thereof (*Effective July 1, 2011*):

55 For each of the fiscal years ending June 30, 2010, and June 30, 2011,  
56 the Connecticut Lottery Corporation shall transfer one million nine  
57 hundred thousand dollars of the revenue received from the sale of  
58 lottery tickets to the chronic gamblers treatment rehabilitation account  
59 created pursuant to section 17a-713. For the fiscal year ending June 30,  
60 2012, and each fiscal year thereafter, the Connecticut Lottery  
61 Corporation shall transfer one million [five] nine hundred thousand  
62 dollars of the revenue received from the sale of lottery tickets to the  
63 chronic gamblers treatment rehabilitation account created pursuant to  
64 section 17a-713.

65 Sec. 4. Section 38a-488b of the general statutes is repealed and the  
66 following is substituted in lieu thereof (*Effective July 1, 2011*):

67 Each individual health insurance policy providing coverage of the  
68 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-  
69 469 that is delivered, issued for delivery, renewed, amended or  
70 continued in this state on or after January 1, 2009, shall provide  
71 coverage for physical therapy, speech therapy and occupational  
72 therapy services for the treatment of autism spectrum disorders, as set  
73 forth in the most recent edition of the American Psychiatric  
74 Association's "Diagnostic and Statistical Manual of Mental Disorders",  
75 to the extent such services are a covered benefit for other diseases and  
76 conditions under such policy. Coverage for any child under the age of  
77 three shall be in conformity with the provisions of this section and

78 section 38a-490a, as amended by this act.

79 Sec. 5. Subsection (e) of section 38a-514b of the general statutes is  
80 repealed and the following is substituted in lieu thereof (*Effective July*  
81 *1, 2011*):

82 (e) Such policy shall not impose (1) any limits on the number of  
83 visits an insured may make to an autism services provider pursuant to  
84 a treatment plan on any basis other than a lack of medical necessity, or  
85 (2) a coinsurance, copayment, deductible or other out-of-pocket  
86 expense for such coverage that places a greater financial burden on an  
87 insured for access to the diagnosis and treatment of an autism  
88 spectrum disorder than for the diagnosis and treatment of any other  
89 medical, surgical or physical health condition under such policy.  
90 Notwithstanding the provisions of this subsection, coverage for any  
91 child under the age of three shall be in conformity with the provisions  
92 of section 38a-516a, as amended by this act.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2011</i>	38a-490a
Sec. 2	<i>July 1, 2011</i>	38a-516a
Sec. 3	<i>July 1, 2011</i>	12-818
Sec. 4	<i>July 1, 2011</i>	38a-488b
Sec. 5	<i>July 1, 2011</i>	38a-514b(e)

**Statement of Purpose:**

To implement the Governor's budget recommendations.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*